CANDIDATE OATH -**NONPARTISAN OFFICE**

(Not for use by Judicial or **School Board Candidates**)

RECEIVED 2015 SEP 11 PM 3: 26 CITY CLERK'S OFFICE

DOREEN A FEIGURE MY COMMISSION # EE218812

EXPIRES July 23, 2010

FlorideNotaryService GPE 15.2.0001, F.A.C.

OFFICE USE ONLY

	ATH OF CANDIDATE Section 99.021, Florida Statutes)		
. Ricky Arriola	•		
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR O	ON THE BALLOT * - NAME MAY NOT B	E CHANGED AFTER THE END OI	F QUALIFYING)
am a candidate for the nonpartisan office of	Miami Beach City	Commissioner ,	N/A ,
5.	(office)	_	(district #)
N/A , 5 ; I am a q	ualified elector of Miami-I	Dade	County, Florida;
(circuit #) (group or seat #)			
I am a qualified elector of the City of Miami Beach, Florid elected office, with my legal residence being: 140 Jeff and Charter of said City and under the Constitution and the qualified for no other public office in the state, the ter resigned from any office from which I am required to residue United States and the Constitution of the State of Florida.	ferson Ave APT 14010, Miami E Laws of Florida to hold the office to m of which office or any part thereofign pursuant to Section 99.012, Florida. 305-523-1115	teach, Florida. I am qualified u which I desire to be nominated runs concurrent with the office da Statutes; and I will support rickymb2015 @	nder the ordinances of or elected; I have I seek; and I have the Constitution of constitution of constitution
X Signature of Candidate	Telephone Number	Email Addre	ess
140 Jefferson Ave APT 14010 Miami Bea	——————————————————————————————————————		33139
Address City	Stat	e. Zi	P Code
* Please print name phonetically on the line be with disabilities (see instructions on page 2 of RIK ee ah ree OH lah	elow as you wish it to be prono		t for persons
STATE OF FLORIDA			
COUNTY OF			
Sworn to (or affirmed) and subscribed before Personally Known: or Produced Identification:	Signature	W A LUMD, 2 e of Notary Public e, or Stamp Commissioned Na	
Type of Identification Produced:	المُنْفِئِينِينِينِينِينِينِينِينِينِينِينِينِينِ	DOREEN A FERNA	NDEZ



RECENTED

2015 SEP 11 PM 3: 26

CITY OF MIAMI BEACH OATH/AFFIRMATION

STATE OF FLORIDA **COUNTY OF MIAMI-DADE**

Before me, an officer authorized to administer oaths, personally appeared to me well known who, being
sworn, says that he/she is a candidate for the office of Mayor or City Commissioner, Group No.
residing within the City at least one year before qualifying for City of Miami Beach elected office; that his/her legal residence is: 140 Jefferson Ave, APT 14010, Miami Beach FL, 33139
Miami Beach, Miami-Dade County, Florida; that he/she is qualified under the ordinances (including
Miami Beach City Code Chapter 38 governing "Elections") and Charter of said City to hold such office;
and that he/she has paid the required qualification fee or filed with the City Clerk a petition approving
his/her candidacy signed by sufficient qualified and registered voters to constitute not less than two
percent (2%) of this number of such voters as the same shall be on the date sixty (60) days prior to
the first day of qualifying as a candidate for office.
Signature of Candidate
Sworn to (or affirmed) and subscribed before me this 11 day of September, 2015, by
Jose Riday Arriola
Jose Ridcy Arriola DOREEN A FERNANDEZ MY COMMISSION # EE218812 EXPIRES July 23, 2016 (407) 398-0153 Floridan/Otary/Service.com (NOTARY SEAL)
Doveen A. Fernandez
Name of Notary Typed, Printed or Stamped
Personally Known OR Produced Identification

FORM 1	STATEM	ENT OF		2014	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	ESTS FOR OFFICE USE ONLY:		-
LAST NAME - FIRST NAME - MIDDL	E NAME :				
Arriola Jose Ricky					
MAILING ADDRESS :					
1413 Sunset Harbor Dr #211				·	
				2015 SEP CITY OL	
CITY:	ZIP: COUNTY:			7 5 7	Ü
Miami Beach	Florida Dade	<u> </u>			
NAME OF AGENCY :	•				
NAME OF OFFICE OR POSITION HEL	D OR SOUGHT :			CITY CLERK'S	1 (
Miami Beach City Commission ,				S	F***
You are not limited to the space on the ill	nes on this form. Attach additional sheet	s, if necessary.		O	- 1 î
CHECK ONLY IF Z CANDIDATE			·-	-: 1	امست أصد
	PARTS OF THIS SECT	ION MUST BE COM	PLETE	D ****	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU YEAR OR ON A FISCAL YEAR. PLI	IR FINANCIAL INTERESTS:FOR TI EASE STATE BELOW WHETHER T	HE PRECEDING TAX YEAR, THIS STATEMENT IS FOR TI	WHETHI	ER BASED ON A CALENDAR EDING TAX YEAR ENDING	
EITHER (must check one): DECEMBER 31, 2	014 <u>OR</u> 🗀 SPECIF	Y TAX YEAR IF OTHER THAI	NTHE CA	ALENDAR YEAR:	
MANNER OF CALCULATING REFILERS HAVE THE OPTION OF USING COMFOR FOR FOR THE ON T	ING REPORTING THRESHOLDS I PARATIVE THRESHOLDS, WHICH	HAT ARE ABSOLUTE DOLLA ARE USUALLY BASED ON I	R VALUE PERCEN	ES, WHICH REQUIRES FEWER TAGE VALUES (see instructions	
	PERCENTAGE) THRESHOLDS	OR DOLLA	R VALU	E THRESHOLDS	
PART A PRIMARY SOURCES OF II	NCOME [Major sources of income to toport, write "none" or "n/a")	he reporting person - See instru	ictions]		
NAME OF SOURCE OF INCOME	sou	SOURCE'S DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY	
Inktel Holdings Corp	8200 NW 33rd, suite 1	00, Miami, FL 33122	Busi	ness Process Outsourcing	
	OF INCOME				
PART B — SECONDARY SOURCES [Major customers, clients, (If you have nothing to r	OF INCOME and other sources of income to busines eport, write "none" or "n/a")	sses owned by the reporting per	son - See		
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
Inktel Holdings Corp	Wai Mart inc	702 SW 8th St, Bentonville, AK Retailer		Retailer	
					1
PART C - REAL PROPERTY [Land, (if you have nothing to re	buildings owned by the reporting perso port, write "none" or "n/a")	on - See instructions]	l and v	G INSTRUCTIONS for when where to file this form are ed at the bottom of page 2.	
1413 Sunset Harbor Dr #211, N	flami Beach, FL 33139		INST	RUCTIONS on who must file form and how to fill it out	
			begir	on page 3.	

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PART D — INTANGIBLE PERSONAL PROPERTY [Store (If you have nothing to report, write "none	" or "n/a")		V
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
SEE ATTACHED SHEET			
PART E — LIABILITIES [Major debts - See instructions (If you have nothing to report, write "none NAME OF CREDITOR] " or "n/a")	ADDRES	S OF CREDITOR
SEE ATTACHED SHEET			
		_	
PART F — INTERESTS IN SPECIFIED BUSINESSES [C (If you have nothing to report, write "none"	Ownership or positions in or "n/a") BUSINESS EI		, 51
NAME OF BUSINESS ENTITY	Apollo	Bank	BUSINESS ENTITY #2(S
ADDRESS OF BUSINESS ENTITY	1150 South Miam	ni Ave Miami FL	
PRINCIPAL BUSINESS ACTIVITY	Bar		
POSITION HELD WITH ENTITY	N/	4	<i>y</i> =
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	N/A	\	-T1 C
NATURE OF MY OWNERSHIP INTEREST	Inves		
IF ANY OF PARTS A THROUGH F ARE	CONTINUED ON A	SEPARATE SHE	ET, PLEASE CHECK HERE
SIGNATURE OF FILER: Signature: Date Signed:		If a certified public act attorney in good star form for you, he or star form for your form for your first form for the form	countant licensed under Chapter 473, or ading with the Florida Bar prepared this he must complete the following statement Coordance with Section 112.3145, Floridatructions to the form. Upon my reasonable f, the disclosure prepared true and correct ure:

WHAT TO FILE:

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

NOTE

MULTIPLE FILING UNNECESSARY:

A candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying. A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

FILING INSTRUCTIONS:

WHERE TO FILE:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

Facsimiles will not be accepted.

- .

WHEN TO FILE:
Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment. Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2014.

PART D — INTANGIBLE PERSONAL PROPERTY			
(CONTINUATION)			
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
ISHARES MSCI EMRG MKT FD - ETF			
ISHARES MSCI JPN ETF			
SPDRS&P500ETFTR			
FACEBOOK, INC. – Common Stock			
CITIBANK – Checking Account	8750 Doral Blvd Miami FL 33178		

PART E — LIABILITIES	
	(CONTINUATION)
NAME OF CREDITOR	ADDRESS OF CREDITOR
BANK UNITED	PO Box 02603, Miami FL 33012
US BANK	PO Box 3427, Oshkosh, WI 54903
CITIBANK	PO Box 6062, Sioux Falls, SD 57117
SABADELL UNITED	PO Box 5460 Hialeah FL 33014



2015 SEP 11 PM 3: 21

Form 9 QUARTERLY GIFT DISCLOSURE (GIFTS OVER \$100)				
LAST NAME FIRST NA		NAME OF	'	
Arriola, Jose Ricky			ach City Commission	
MAILING ADDRESS:			R POSITION HELD:	
8200 NW 33rd Street, \$	Suite 100	City Comr	missioner, Group 5	
CITY:	ZIP: COUNTY:	FOR QUAF	RTER ENDING (CHECK ON	NE): YEAR
Miami, 33	122 Miami-Dade	□MARCH	ØJUNE □SEPTEMBER	□ DECEMBER 20 <u>15</u>
	PART A — S	STATEMENT OF	GIFTS	•
being filed. You are required a date(s) the gift was received. explained more fully in the ins	e value of which you believe to exceed to describe the gift and state the monet If any of these facts, other than the gift structions on the reverse side of the for statement for any calendar quarter of	ary value of the gift, t description, are unkr m, you are not require	he name and address of the penown or not applicable, you shoud to disclose gifts from relative	erson making the gift, and the buld so state on the form. As es or certain other gifts. You
DATE RECEIVED	DESCRIPTION OF GIFT	MONETARY VALUE	NAME OF PERSON MAKING THE GIFT	ADDRESS OF PERSON MAKING THE GIFT
n/a	n/a	n/a	n/a	n/a
				_
				OIS S
				CLEIK'S
☐ CHECK HERE IF CONTINUED ON SEPARATE SHEET			- o	
	PART B — RECEIPT PROV	IDED BY PERSO	ON MAKING THE GIFT	ني آ
If any receipt for a gift lister form. You may attach an ex	d above was provided to you by the popularition of any differences between	erson making the gif the information disc	it, you are required to attach a closed on this form and the inf	copy of that receipt to this
□ CHECK HERE IF A RECEIPT IS ATTACHED TO THIS FORM				
PART C — OATH				
I, the person whose name ap	pears at the beginning of this form, do	STATE OF F	LORIDA MIami-Da	de
depose on oath or affirmation	and say that the information disclosed	Sworn to (or	affirmed) and subscribed before	e me this

I, the person whose name appears at the beginning of this form, do	STATE OF FLORIDA COUNTY OF 1916
depose on oath or affirmation and say that the information disclosed	Sworn to (or affirmed) and subscribed before me this day of Septem be 20 15
herein and on any attachments made by me constitutes a true accurate,	by Jose Ricky Arriola
and total listing of all gifts required to be reported by Section 112.3148	JUM a Finant
Florida Statutes.	(Signature of Notary Public State of Florida)
SIGNATURE OF REPORTING OFFICIAL	(Print, Type, or Stamp Commissioned Name of Notary Public) Personally KnownOR Produced Identification Type of Identification Produced

PART D — FILING INSTRUCTIONS

This form, when duly signed and notarized, must be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303. The form must be filed no later than the last day of the calendar quarter that follows the calendar quarter for which this form is filed (For example, if a gift is received in March, it should be disclosed by June 30.)

CE FORM 9 - EFF. 1/2007 (Refer to Rule 34-7.010(1)(g), F.A.C.)(Rev. 9/2013)

(See reverse side for instructions)



USF Administration of Finance Director BE COMPLETED) BY Contraction Dopt: City Clerk Ext: 74/11 Dopt: City Clerk Ext: 74/11	1044 Will Ethicular for Date of Fault Will Translation for Date of San 215-631
Y · Branches E	

MIAMIBEACH

NOTICE OF TESTING OF THE TABULATING EQUIPMENT (LOGIC AND ACCURACY TEST) AND CANVASSING BOARD SCHEDULE FOR THE CITY OF MIAMI BEACH RUN-OFF ELECTION (IF NECESSARY) NOVEMBER 17, 2015

Pursuant to Florida Statute §101.5612, notice is hereby given of the time and location of the public preelection test of the automatic tabulating equipment (Logic and Accuracy Test) for the November 17, 2015 Miami Beach Run-Off Election (if necessary).

Pursuant to Florida Statute §102.141, notice is hereby given of the time and place during which the City of Miami Beach Canvassing Board for the November 17, 2015 Miami Beach Run-Off Election (if necessary) will meet to canvass the absentee electors' ballots and provisional ballots.

The City of Miami Beach Canvassing Board will convene at the Office of the Supervisor of Elections, 2700 NW 87 Avenue, Miami, Florida. The Canvassing Board is convening on these dates in preparation to conduct the Miami Beach Run-Off Election to be held on November 17, 2015 (if necessary).

DATE/TIME	ACTIVITY	ATTENDANCE
Thursday, 11/12/15 10:00 a.m.	Logic and Accuracy Test of the touch screen and optical scan voting systems to be used for absentee, early voting, and precinct ballots	All Canvassing Board Members or one designated Canvassing Board Member
Friday, 11/13/15 10:00 a.m. through Tuesday, 11/17/15	 Pre-count Logic and Accuracy Test of the optical scan system used for absentee and provisional ballots Absentee ballot opening and processing (as needed) Duplication of ballots (as needed) 	All Canvassing Board Members or one designated Canvassing Board Member
Tuesday, 11/17/15 Canvassing: 5:00 p.m. to completion	 Absentee ballot opening and processing (as needed) Duplication of ballots (as needed) Canvassing of presumed invalid absentee ballots and provisional ballots Tabulation of results Unofficial Results provided by the Supervisor of Elections 	All Canvassing Board Members OITY CLER
Friday, 11/20/15 11:30 a.m. to completion	 Canvassing of provisional ballots (if needed) Certification of Official Results, including provisionals, by the Supervisor of Elections Post-count Logic and Accuracy Test of the optical scan system used for absentee and provisional ballots Race and precinct(s) selection for manual post-election audit Audit process starts to completion 	All Canvassing Board Members Majority of the Canvassing Board Members or designees

JN = 9/11/15

All proceedings will be open to the public. To request this material in alternate format, sign language interpreter (five-day notice required), information on access for persons with disabilities, and/or any accommodation to review any document or participate in any City-sponsored proceedings, call 305.604.2489 and select 1 for English or 2 for Spanish, then option 6; TTY users may call via 711 (Florida Relay Service).

In accordance with Florida Statute §286.0105, a person who appeals any decision by the Canvassing Board with respect to any matter considered at a meeting, he or she will need a record of the proceedings and therefore will need to ensure that a verbatim record of the proceedings is made.

Please note that the Canvassing Board Schedule is subject to change, if needed. Please contact the Office of the City Clerk at 305.673.7411 if you have any questions.

The County Canvassing Board Members are TBD - County Judge, Chairperson; Rafael E. Granado, City Clerk; and TBD - Miami Beach Resident.

NOTICE OF TESTING OF THE TABULATING EQUIPMENT (LOGIC AND ACCURACY TEST) AND CANVASSING BOARD SCHEDULE FOR THE CITY OF MIAMI BEACH GENERAL AND SPECIAL ELECTIONS NOVEMBER 3, 2015

Pursuant to Florida Statute §101.5612, notice is hereby given of the time and location of the public preelection test of the automatic tabulating equipment (Logic and Accuracy Test) for the November 3, 2015 Miami Beach General and Special Elections.

Pursuant to Florida Statute §102.141, notice is hereby given of the time and place during which the City of Miami Beach Canvassing Board for the November 3, 2015 Miami Beach General and Special Elections will meet to canvass the absentee electors' ballots and provisional ballots.

The City of Miami Beach Canvassing Board will convene at the Office of the Supervisor of Elections, 2700 NW 87 Avenue, Miami, Florida. The Canvassing Board is convening on these dates in preparation to conduct the Miami Beach General and Special Elections to be held on November 3, 2015.

DATE/TIME	ACTIVITY	ATTENDANCE
Thursday, 10/15/15 10:00 a.m.	 Logic and Accuracy Test of the touch screen and optical scan voting systems to be used for absentee, early voting, and precinct ballots 	All Canvassing Board Members or one designated Canvassing Board Member
Friday, 10/30/15 1:00 p.m. through Tuesday, 11/3/15	 Pre-count Logic and Accuracy Test of the optical scan system used for absentee and provisional ballots Absentee ballot opening and processing (as needed) Duplication of ballots (as needed) 	All Canvassing Board Members or one designated Canvassing Board Member
Tuesday, 11/3/15 Canvassing: 5:00 p.m. to completion	 Absentee ballot opening and processing (as needed) Duplication of ballots (as needed) Canvassing of presumed invalid absentee ballots and provisional ballots Tabulation of results Unofficial Results provided by the Supervisor of Elections 	All Canvassing Board Members
Friday, 11/6/15 1:30 p.m. to completion	 Canvassing of provisional ballots (if needed) Certification of Official Results, including provisionals, by the Supervisor of Elections Post-count Logic and Accuracy Test of the optical scan system used for absentee and provisional ballots Race and precinct(s) selection for manual post-election audit Audit process starts to completion 	All Canvassing Board Members Majority of the Canvassing Board Members or designees

9/11/15

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